JUL 2 8 2006

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PTO/SB/17 (01-06)
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Under the Paperwork Reduction Act of	1995, no person alena	FRARE	espondent a conectio		plete if Know		ona or namber.				
Fees pursuant to the Consolidated Approp	riations Act, 2005 (H.R	2. 48 (O).=	Application Num		0/763,333-Cc						
FEE TRANS			January 26, 2004								
For FY 20	First Named Inventor		Sung-Han JUNG								
1011120			A. M. Hines								
Applicant claims small entity state	Art Unit 2879										
TOTAL AMOUNT OF PAYMENT	Attorney Docket No. 0630-1942P										
TOTAL AMOUNT OF PAYMENT (\$) 1,520.00 Attorney Docket No. 0630-1942P  METHOD OF PAYMENT (check all that apply)											
x Check Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP											
For the above-identified depo	sit account, the Di	rector is	hereby authorize	ed to: (chec	k all that apply)						
Charge fee(s) indicated	below		Charge	e fee(s) ind	icated below, ex	cept for th	e filing fee				
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17											
FEE CALCULATION (All the fe	es below are du	e upor	filing or may	be subjec	ct to a surcha	rge.)					
1. BASIC FILING, SEARCH, AND EX											
FII	ING FEES	SEA	ARCH FEES	EXAMIN	ATION FEES						
Application Type Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)				
Utility 300	150	500	250	200	100						
Design 200	100	100	50	130	65						
Plant 200	100	300	150	160	80						
Reissue 300	150	500	250	600	300						
Provisional 200	100	0	0	0	0						
2. EXCESS CLAIM FEES							mall Entity				
Fee Description						Fee (\$)	Fee (\$)				
Each claim over 20 (including Reiss	,					50	25				
Each independent claim over 3 (incl	iding Reissues)					200	100				
Multiple dependent claims						360	180				
			aid (\$) Multiple Depend								
HP = highest number of total claims paid for				<u>Fee</u>	<u>= (\$)</u> <u>F</u>	ee Paid (\$)					
Indep. Claims Extra Claims		Eag D	aid (\$)		<del></del>		-				
5 -5 = 2	Fee (\$)	1001	αια (ψ)								
HP = highest number of independent claims	paid for, if greater than	1 <b>3</b> .	<del></del>								
3. APPLICATION SIZE FEE							-				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
Total Sheets Extra Sheet	<u>Number o</u>	f each ac	ditional 50 or frac			Fee P	aid (\$)				
100 = 4. OTHER FEE(S)	/50		(round up to a who	le number) >	` <sup>=</sup>	Fees F	aid (\$)				
Non-English Specification, \$130	) fee (no small ent	ity disco	unt)								
Other (e.g., late filing surcharge): 1401 Notice of appeal 500.00 1253 Extension for response within third month 1,020.00											
SUBMITTED BY	200										
Signature Junes 1. 2	lle,		Registration No. (Attorney/Agent)	39,538	Telephone	(703) 205	-8000				
Name (Print/Type) James T. Eller, Jr					Date	July 28, 2	2006				

OVPE 423

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AMEN	NDMENT :	ΓRANSMI	TTAL LE	TTER &	Do	eket No. 0-1942P	
Applicatio	n No.	Filing I	Date	Examiner	HOEMA	Art Unit	
10/763,333-Cd	onf. #6966	January 2	6, 2004	A. M. Hine	s	2879	
Applicant(s): Sun	g-Han JUNG						
Invention: COLOF	R CATHODE R	AY TUBE					
MS AF Commissioner for I P.O. Box 1450 Alexandria, VA 223 Transmitted here	313-1450	ndment in the	above-identif	ied application.			
The fee has been	n calculated an	d is transmitte	d as shown b	elow.			
			S AS AMEN	DED			
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate			
Total Claims	11	- 20 =		х			
Independent Claims	5	- 5 =		х			
Multiple Depend	lent Claims (ch	eck if applicabl	e)				
Other fee (please specify):  Notice of appeal; Extension for response within third month						,520.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:						1,520.00	
x Large Entity				Small Entity			
No additiona	ıl fee is require	d for this amer	ndment.				
	ge Deposit Acc	ount No0		n the amount of \$		·	
X A check in th	ne amount of \$	1,520.00	is enclo	sed.			
Payment by	credit card. Fo	orm PTO-2038	is attached.				
as described		licate copy of		Deposit Account Nenclosed.	lo. <u>02-</u>	2448	
$\wedge =$		1	n processing	fees required under :	37 CFR 1.1	6 and 1.17.	
James T. Eller, Attorney Reg. N		h		Dated:	July 28,	2006	
BIRCH, STEWA 8110 Gatehous Suite 100 East P.O. Box 747 Falls Church, V (703) 205-8000	e Road irginia 22040-l		.P				